

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?

Yes	S
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⊠ No

(CFA-4) **Summary Sheet**

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TOTAL P	AGES IN ENTIRE CFA-4 REPOR	₹T
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HOOSIERS FOR JOVEN 2. Acronym or Abbreviated Name (if any) 3. Committee Telephone Number () 4. Mailing Address (address where all campaign finance correspondence is received)					
2. Acronym or Abbreviated Name (If arry) 4. Mailing Address (address where all campaign finance correspondence is received) 5. City, State, ZiP Code 6. Party Affiliation (If applicable) Republican CANDIDATE INFORMATION (For Candidato's Committees Only) 7. Full Name of Candidate (include any nickname) James A Joven 9. Office Sought (include district number, if arry. Not required for exploratory committee.) TYPE OF REPORT 11. Check one: Pre-Pornary Pre-Election Annual Nomination Officer Pre-Pornary Pre-Election Annual Nomination Officer Pre-Pornary Pre-Election Annual Nomination Officer Pre-Pornary Pre-Convention 12. Reporting Period: 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments at the beginning of this reporting period. 15. Old lines 15 and 15b in both columns Subtotal 16. Add lines 15 and 15b in Column A and lines 14 and 15c in Column B TOTAL EXPENDITURES (Note: These amounts include in-kind expenditures and loans, as well as cash contributions.) 17. Lamined (use Schedule B) (Public Question: use Schedule C) \$501.23 \$501.23 17. Lamined (use Schedule B) (Public Question: use Schedule C) \$501.23 \$501.23 18. Cash on Well By the committee (use Schedule D) \$0.000 19. Debts OWED By the committee (use Schedule D) \$23,301.32	1. Full Name of Committee (as on Statement of Organization)	ame			
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	CERTIFICATION	₹ a
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO T	THE BEST OF MY KNOWLEDGE AND BELIEF	IT IS TRUE, CORRECT AND COMPLETE.
Signature of Treasurer	Title - Treasurer	Date 01/18/2017
Signature of Candidate (if applicant)		Date 01/18/2017
MM DNUNCE Any information continued in this second may not be	anning for sole as used for any seminarial m	urnana (IC 2 0 4 E) A marana suba kansulanku

WARNING: My information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly the a fraudulent report committee a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY

Myla a Eldred
JAN 18 2017
FILED

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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be Itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE	NUMBER	?
Pag	e 2 of 3	-

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF
forder, manuscr, only, state, an seedy	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITURE
Code C Marion County Republican Central Committee 47 S Pennsylvania St Suite 300 Indianapolis, IN 46204	PAC	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: sponsorship	\$150.00	\$150.00	12/14/2016
Code O James A Joven 11871 Challenge Ct Indianapolis, IN 46236	attorney	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: partial repayment of loan to campaign	\$351.23	\$501.23	12/15/2016
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other ☐ Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$501.23		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON TH (Enter total on ITEM 17a of		\$501.23		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER	
	!
Page 3 of 3	

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, slate, ZIP code)	NATURE OF DEBT	Documented on previous	YEAR-TO-DATE \$0.00	PERIOD \$23,301.32
James A. Joven 11871 Challenge Ct. Indianapolis, IN 46236		Loan	reports		
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